TOF 08 SOOP

P.O. Box 747 • Falls Church, Virginia 22040-0747 : Telephone: (703) 205-8000 • Facsimile: (703) 205-8050 BIRCH

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if only one inventor is named below) or an original, first and joint inventor (if only one inventor is named below) or an original, first and joint inventor (if only one inventor is named below) or an original, first and joint inventor (if only one inventor is named below) or an original, first and joint inventor (if only one inventor is named below) or an original, first and joint inventor (if only one inventor is named below) or an original, first and joint inventor (if only one inventor is named below) or an original, first and joint inventor (if only one inventor is named below) or an original, first and joint inventor (if only one inventor is named below) or an original, first and joint inventor (if only one inventor is named below) or an original, first and joint inventor (if only one inventor is named below) or an original, first and joint inventor (if only one inventor is named below) or an original inventor (if only one inventor is named below).

	invention entitled:	ors are named	a perom) of the stiple	et matter which is	cranned and for MV	ich a patent is so	ought on the	
nsert Title:	BLECTROMECHANICAL :	RANSDUCER A	AND A MANUFACTUR	ING METHOD	<u> </u>	•		
Fill in Appropriate	the specification of which the specification was	is attached her	reto. If not attached he	ereto,			as	
For Use Without	United States Applic	ation Number				GG!!\!_\	i	
Specification	and amended on	Glad on June	23. 2004 .		1, 1	(if applicable)		
Attached:	International Applic	ation Number	PCT/F12004/00038	2	,		ind was	
	- amended on				-::-	(if app		
na se e e e e e e e e e e e e e e e e e e	and amended on							
	Ido not know and do not believe the same was ever known or used in the United States of America before my or our inventior thereof, or patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this application, that the same was not in public use or on sale in the United States of America more than one year prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my lega representative or assigns more than twelve months (six months for designs) prior to this application, and that no application for patent or inventor's certificate on this invention has been filed in any country foreign to the United States of America prior to this application by me or my legal representatives or assigns, except as follows. I hereby claim foreign priority benefits under Title 35, United States Code, \$119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate isted below and have also identified below any foreign application for patent or inventor's certificate isted below and have also identified below any foreign application for patent or inventor's certificate isted below and have also identified below any foreign application for patent or inventor's certificate is application on which priority is claimed:							
1	Prior Foreign Applicat	ion(s)	•		1	Priority C	laimed	
Insert Priority	2003.0945	Finland		June 25, 2	2003	(7)	m	
nförmation;	(Number)	(Country)			<u> </u>		No.	
(if appropriate)	(tvatiber)	(cominy)		(money bay) ₁ 1 cm 1 mcm,	<u></u>		
				Month/Day/Year Filed) Priority Claim June 25, 2003 (Month/Day/Year Filed) Yes No (Month/Day/Year Filed) Yes No				
	(Number)	(Country)		(Month/Day	/Year Fued)	res	140	
	(Number)	(Country)	• • • • • • • • • • • • • • • • • • • •	(Month/Day	/Year Filed)	Yes	No	
1	((• •				
į	OT	/C		(Month/Day	/Vear Filed)	· Yes	No	
	(Number)	(Сошъу)	•		••			
	I hereby claim the benefi	t under Title 35	i, United States Code,	\$119(e) of any:Unit	ed States provisional	applications(s) lis	sted below.	
		. •			` .		. 1 ,22	
Insert Provisional	(A. Alientine Missouleau)	·		(Filing D	ate)		· · · · ·	
Application(9): (if any)	(Application Number).	•		/2 222 (2 = -		٠		
						 		
	(Application Number)			(Filing D	a,te)			
1 4 · · ·	All Foreign Applications the Filing Date of This A		y Patent or Inventor's	Certificate Filed M	fore than 12 Months (6 Months for Des	signs) Prior t	
	Country		Application Number	r	Date of Filing (Mon	th/Day/Year)	•	
Insert Requested Information: (If appropriate)		•			· · · · · · · · · · · · · · · · · · ·			
	I hereby claim the benefi insofar as the subject m application in the manni information which is me between the filling date of	latter of each er provided by literial to the pa	of the claims of this the first paragraph o tentability as defined	application is not f Title 35, United St in Title 37, Code o	ales Code, \$112, I ac f Federal Regulations	or Onited States knowledge the di s, §1.56 which bec		
Insert Prior U.S.	 :						2\	
Application(s): (if any)	(Application Number)		(Filing Date)		(Status - patented, p	ending, abandon	ea)	
Page 1 of 2 (Kev. 12/19/01)	(Application Number)		(Filing Date)	· · · · · · · · · · · · · · · · · · ·	(Status - patented, p	ending, abandon	ed)	

Attorney	Docket No	
----------	-----------	--

I hereby appoint the practitioners at CUSTOMER NO. 2292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

BIRCH, STEWART, KOLASCH & BIRCH, LLP or CUSTOMER NO. 2292

P.O. Box 747 • Falls Church, Virginia 22040-0747

Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

i Name of First be 50'd inventor: AT Name of history — grt Date This Jocument is Signed	GIVEN NAME/FAMILY NAME Terho Kutilainen	INVENTOR'S SIGNATURE	,	DATE*				
	Residence (City, State & Country)	U	CITIZENSHI					
ort Residence ert Ciusenship 😁	Kilminhi, Finle	and .	Finnish					
qri Mailung Adula≥ss →	MAILING ADDRESS (Complete Street Add PCKantie 2 F	ress including City, State & Country)	1 N K 1	E'nara				
ll Name of Secural aventor, if pays	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*				
letá: apand	Dawta Tian ** see comment Dawa! Residence (City, State & Country)		CITIZENSH	28.12. Q5				
KERAVA -	DUTO, FINLAND		Chinese	•				
	MAILING ADDRESS (Complete Street Address including City, State & Country)							
(*)		120-90-630 OULD, FIL	ILAND					
Il Name of Third Inventor, If any: see above	GIVEN NAME/FAMILY NAME	- INVENTORSSIGNATURE	A FIVLAN	DATE*-				
1	Residence (City, State & Country)	-0,1F1- 0.722 0 MERITA	CITIZENSH					
	MAILING ADDRESS (Complete Street Address including City, State & Country)							
ull Name of Fourth Inventor, if any:	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE				
	Residence (City, State & Country)		CITIZENSH	IP				
	Residence (City, State & Country) MAILING ADDRESS (Complete Street Add	dress including City, State & Country)	CITIZENSH	IP				
		dress including City, State & Country)	CITIZENSH	DATE*				
ere above II Name of Pith [Iventor, if any;	MAILING ADDRESS (Complete Street Add		CITIZENSH	DATÉ*				
ere above II Name of Pith [Iventor, if any;	MAILING ADDRESS (Complete Street Add	INVENTOR'S SIGNATURE		DATÉ*				
ere above II Name of Pith [Iventor, if any;	MAILING ADDRESS (Complete Street Add GIVEN NAME/FAMILY NAME Residence (City, State & Country)	INVENTOR'S SIGNATURE		DATÉ*				
ili Name of Fühlingventor, if any: Di Name of Stath Inventor, if any:	MAILING ADDRESS (Complete Street Address (Comp	INVENTOR'S SIGNATURE dress including City, State & Country)		DATE*				

Page 2 of _ 2 (Rev. 12/19/01)

*DATE OF SIGNATURE

** Correction made by inventor Dewei Tian

31 Oct. 08.